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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 10/767,111		Filing Date 01/28/2004		To be Mailed
APPLICATION AS FILED - PART I (Column 1) (Column 2)								SMALL	ENTITY	OTHER THAN OR SMALL ENTITY		
FOR NUMBER FILED					NUMBER EXTRA			RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
BASIC FEE (37 CFR 1.18(a), (b), or (c))			N/A		N/A			N/A		-1	N/A	
SEARCH FEE (37 CFR 1.16(k), (i), or (m))			N/A		N/A			N/A			N/A	
EXAMINATION FEE (37 CFR 1.18(o), (p), or (q))			N/A		N/A			N/A			N/A	
TOTAL CLAIMS (37 CFR 1.16(i))			minus 20 =		•			x \$ =		OR	X \$ =	
INDEPENDENT CLAIMS (37 CFR 1.16(h))			minus 3 =					x \$ =			x \$ =	
	APPLICATION SIZE (37 CFR 1.16(s))	FEE she is \$ add 35	If the specification and of sheets of paper, the app is \$250 (\$125 for small of additional 50 sheets or 1 35 U.S.C. 41(a)(1)(G) and			olication size fee due entity) for each fraction thereof. See and 37 CFR 1.16(s).						
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))										┨		·
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL		J	TOTAL	
	DELLAMINO				(Column 2) (Column 3)				LL ENTITY ADDITIONAL	OR	SM/	ER THAN ALL ENTITY ADDITIONAL
AMENDMENT	02/13/2007	AFTER AMENDMENT		PREVIOU PAID FOI	JSLY	EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
	Total (37 CFR 1.18(i))	• 39	Minus	- 39		= 0		x \$ =		OR	X \$50=	0
	Independent (37 CFR 1,18(h))	• 6	Minus	6		= 0		X \$ =		OR	X \$200=	0
₽	Application Size Fee (37 CFR 1.16(s))									<u> </u>		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR		
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
(Column 1) (Column 2) (Column 3)												
DMENT	5/18/07	CLAIMS REMAINING AFTER AMENDMEN		HIGHE NUMB PREVIOL PAID F	ER USLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16(1))	.39	Minus	- 39	•	= O		x \$ =		OR	x \$ =	
	Independent (37 CFR 1.18(h))	· 6	Minus	6		= 0		X \$ =	4-14	OR	x \$ =	
AMENDA	Application Size Fee (37 CFR 1.16(s))											
Ą	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(I))									OR		
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
• If the entry in column 1 is less than the entry in column 2, write "0" in column 3. • If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". • If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

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